

## Bursary Application Form

Please take the time to complete this form and return it to as soon as possible. Information gathered via this form will be added to our secure database, and used to monitor our Bursary Funding.

### Section One: Participant Details

Full Name	
Postal Address	
Email Address	

### Section Two: Activity Details *(please only use for **one activity** – see supporting guidance)*

We have a limited annual fund, and we are keen to help as many people as possible through the bursary scheme. The more you are able to contribute towards the cost of the activity, enables us to support more people. (The majority of our bursaries cover 10 -40% of the activity fee)

Activity for which bursary is sought			
Date/s of activity		Full cost of activity	£
Please indicate how much you are able to pay			£
Please indicate how much assistance you are requesting			£

### Section Three: Bursary Request

Please detail your reasons for applying for a bursary

### Section Four Supporting Evidence

It is not necessary, but helpful to us, if you are able to supply any supplementary evidence to support your application, eg, letter of endorsement from doctor/social services.

Are you providing any supporting evidence with your application?

Yes / No

### **Section Five: Contact Details**

*If the participant is under the age of 16, this section needs to be filled in with the contact details of an appropriate adult on their behalf.*

Name and Relationship to Participant <i>(if completing for under 16 year old)</i>	
Telephone Number	
Email Address	

### **Section Six: Declaration**

*Only participants over 16 can sign the Declaration section. If the participant is under 16, a parental or other suitable signature is required.*

- I declare that the information given in support of this application is correct and complete to the best of my knowledge.
- I understand that this information will not be shared with a third party, except for audit purposes.
- I understand that poor attendance, unauthorised absences, non-compliance or receiving a formal warning may result in loss of financial support.
- I give permission to NT to record the information in this form electronically for the purpose of monitoring the bursary funding.

**Signed:**

**Date:**

Please return to:

**Post:** Wendy Ellis. Learning & Participation Director, Norwich Theatre, Theatre Street, Norwich, NR2 1RL

**Scan and email to** [wendy.ellis@norwichtheatre.org](mailto:wendy.ellis@norwichtheatre.org)

**Hand in at Box Office** marked for the attention of the Learning and Participation Director.

We may contact you if we have any queries regarding the application: *all enquiries are made in the strictest of confidence.* Please do not hesitate to contact Wendy Ellis, Learning and Participation Director, on 01603 598610 if you require any further information.